Privatisation of hospitals

2027.SHRI KARNENDU BHATTACHARJEE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that at present five hospitals in the Capital are going to be privatised;

(b) whether it is also a fact that in Government hospitals jobs will be on contract basis;

(c) if so, what will be the fate of the existing staff of the affected hospitals;

(d) whether Government will intervene in the matter keeping in view the interests of the existing staff; and

(e) if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (e) In so far as three Central Government hospitals in Delhi, namely, Dr. R.M.L. Hospital, Safdarjung Hospital and Lady Hardinge Medical College and its associated hospitals are concerned, there is no proposal to privatize the hospitals as such. However, some non-medical services like sanitation, security, housekeeping etc. are out-sourced. No existing staff is getting adversely affected due to out-sourcing of some non-medical services.

Maternal mortality ratio

2028. SHRI K. CHANDRAN PILLAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that maternal mortality ratio is high in various States;

(b) if so, the details of maternal mortality ratio, State-wise;

(c) whether low nutrition level among women is the cause for the problem; and

(d) if so, the details of steps taken by Government in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (d) Based on the official estimates of Registrar General of India (RGI), the Maternal Mortality Ratio (MMR) for India is 301 per 100,000 live births (SRS 2001-03). MMR for India and the major States is given in the Statement *(See* below).

The same RGI report lists the causes of maternal deaths in the country as-Hemorrhage, Sepsis, Abortion, Obstructed Labour, Hypertensive Disorders and "Others". In the causes classified as "Others", nutritional disorders including anemia are also listed.

The National Rural Health Mission (NRHM) launched by the Government of India in the year 2005, in order to improve the availability of and access to quality healthcare including services for Immunization and Safe Motherhood, seeks to provide effective healthcare to rural population throughout the country with special focus on 18 States with weak public health indicators and/or weak infrastructure.

order to bring about a reduction in MMR, the Government of India is implementing the ing key interventions all over the country, which include: Janani Suraksha Yojana (i), a cash benefit scheme to promote Institutional Delivery with a special focus on Below Poverty Line (BPL) and SC/ST pregnant women; Appointment of an Accredited